



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2019
OF THE CONDITION AND AFFAIRS OF THE

AMERIGROUP Ohio, Inc. dba AMERIGROUP Community Care

| | | | | | | |
|---------------------------------------|--|-----------------|-------------------|---|----------------------|------------|
| NAIC Group Code | 0671 (Current) | 0671 (Prior) | NAIC Company Code | 10767 | Employer's ID Number | 13-4212818 |
| Organized under the Laws of | Ohio | | | State of Domicile or Port of Entry | OH | |
| Country of Domicile | United States of America | | | | | |
| Licensed as business type: | Health Maintenance Organization | | | | | |
| Is HMO Federally Qualified? | Yes [] No [X] | | | | | |
| Incorporated/Organized | 03/08/2002 | | | Commenced Business | 09/01/2005 | |
| Statutory Home Office | 4361 Irwin Simpson Road, C/O Community Ins. Co. (Street and Number) | | | Mason, OH, US 45040 (City or Town, State, Country and Zip Code) | | |
| Main Administrative Office | 4425 Corporation Lane (Street and Number) | | | Virginia Beach, VA, US 23462 (City or Town, State, Country and Zip Code) | | |
| Mail Address | 220 Virginia Ave (Street and Number or P.O. Box) | | | Indianapolis, IN, US 46204 (City or Town, State, Country and Zip Code) | | |
| Primary Location of Books and Records | 220 Virginia Ave (Street and Number) | | | Indianapolis, IN, US 46204 (City or Town, State, Country and Zip Code) | | |
| Internet Website Address | www.amerigroup.com | | | | | |
| Statutory Statement Contact | Tim Niccum (Name) | | | 317-488-6716 (Area Code) (Telephone Number) | | |
| | tim.niccum@anthem.com (E-mail Address) | | | 317-488-6200 (FAX Number) | | |

OFFICERS

| | | | |
|-----------------------|--------------------------|------------------------------------|----------------------|
| President/Chairperson | Kristen Louise Metzger # | Treasurer | Vincent Edward Scher |
| Secretary | Kathleen Susan Kiefer | Vice President/Assistant Secretary | Jack Louis Young |

OTHER

Eric (Rick) Kenneth Noble, Assistant Treasurer

DIRECTORS OR TRUSTEES

| | | |
|------------------|--------------------------|------------------------|
| Jack Louis Young | Kristen Louise Metzger # | Ronald William Penczek |
|------------------|--------------------------|------------------------|

State of Indiana SS:
County of Marion

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

| | | |
|---|--|---------------------------------------|
| Kristen Louise Metzger President/Chairperson | Kathleen Susan Kiefer Secretary | Vincent Edward Scher Treasurer |
|---|--|---------------------------------------|

Subscribed and sworn to before me this
22nd day of February 2020

Rita F. Gentry
Executive Admin Assistant I
January 17, 2021

- a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number
2. Date filed
3. Number of pages attached

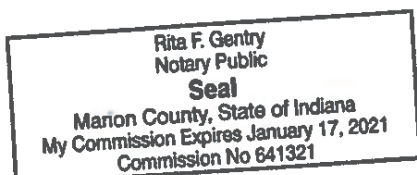


Exhibit 2 - A&H Premiums Due and Unpaid

N O N E

Exhibit 3 - Health Care Receivables

N O N E

Exhibit 3A - Health Care Receivables Collected and Accrued

N O N E

Exhibit 4 - Claims Unpaid and Incentive Pool, Withhold and Bonus

N O N E

Exhibit 5 - Amounts Due From Parent, Subsidiaries and Affiliates

N O N E

| | 1 | 2 | 3 | 4 | 5 | 6 |
|---|--------------------------------------|---|-----------------------------|--|--|---|
| Payment Method | Direct Medical Expense Payment | Column 1 as a % of Total Payments | Total Members Covered | Column 3 as a % of Total Members | Column 1 Expenses Paid to Affiliated Providers | Column 1 Expenses Paid to Non-Affiliated Providers |
| Capitation Payments: | | | | | | |
| 1. Medical groups | 0 | 0.0 | | 0.0 | | |
| 2. Intermediaries | 0 | 0.0 | | 0.0 | | |
| 3. All other providers | 0 | 0.0 | | 0.0 | | |
| 4. Total capitation payments | 0 | 0.0 | 0 | 0.0 | 0 | 0 |
| Other Payments: | | | | | | |
| 5. Fee-for-service | 0 | 0.0 | xxx | xxx | | |
| 6. Contractual fee payments | 2,731 | 100.0 | xxx | xxx | | 2,731 |
| 7. Bonus/withhold arrangements - fee-for-service | 0 | 0.0 | xxx | xxx | | |
| 8. Bonus/withhold arrangements - contractual fee payments | 0 | 0.0 | xxx | xxx | | |
| 9. Non-contingent salaries | 0 | 0.0 | xxx | xxx | | |
| 10. Aggregate cost arrangements | 0 | 0.0 | xxx | xxx | | |
| 11. All other payments | 0 | 0.0 | xxx | xxx | | |
| 12. Total other payments | 2,731 | 100.0 | xxx | xxx | 0 | 2,731 |
| 13. TOTAL (Line 4 plus Line 12) | 2,731 | 100% | xxx | xxx | 0 | 2,731 |

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

| 1 | 2 | 3 | 4 | 5 | 6 |
|----------------|----------------------|-----------------|----------------------------|---------------------------------------|---|
| NAIC Code | Name of Intermediary | Capitation Paid | Average Monthly Capitation | Intermediary's Total Adjusted Capital | Intermediary's Authorized Control Level RBC |
| | NONE | | | | |
| 9999999 Totals | | | XXX | XXX | XXX |

Exhibit 8 - Furniture and Equipment Owned

N O N E



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AMERIGROUP Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION 2. (LOCATION)

| NAIC Group Code | BUSINESS IN THE STATE OF Arizona | | | DURING THE YEAR 2019 | | | | | | | NAIC Company Code | |
|---|----------------------------------|------------------------------------|------------|--------------------------|------------------|------------------|--|---------------------------|-------------------------|-------------|-------------------|--|
| | 1 Total | Comprehensive (Hospital & Medical) | | 4 Medicare Supplement | 5 Vision Only | 6 Dental Only | 7 Federal Employees Health Benefit Plan | 8 Title XVIII Medicare | 9 Title XIX Medicaid | 10 Other | | |
| | | 2 Individual | 3 Group | | | | | | | | | |
| Total Members at end of: | | | | | | | | | | | | |
| 1. Prior Year | | | | | | | | | | | | |
| 2. First Quarter | | | | | | | | | | | | |
| 3. Second Quarter | | | | | | | | | | | | |
| 4. Third Quarter | | | | | | | | | | | | |
| 5. Current Year | | | | | | | | | | | | |
| 6. Current Year Member Months | | | | | | | | | | | | |
| Total Member Ambulatory Encounters for Year: | | | | | | | | | | | | |
| 7. Physician | | | | | | | | | | | | |
| 8. Non-Physician | | | | | | | | | | | | |
| 9. Total | | | | | | | | | | | | |
| 10. Hospital Patient Days Incurred | | | | | | | | | | | | |
| 11. Number of Inpatient Admissions | | | | | | | | | | | | |
| 12. Health Premiums Written (b) | | | | | | | | | | | | |
| 13. Life Premiums Direct | | | | | | | | | | | | |
| 14. Property/Casualty Premiums Written | | | | | | | | | | | | |
| 15. Health Premiums Earned | | | | | | | | | | | | |
| 16. Property/Casualty Premiums Earned | | | | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services | | | | | | | | | | | | |
| 18. Amount Incurred for Provision of Health Care Services | | | | | | | | | | | | |

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products .
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AMERIGROUP Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION 2. (LOCATION)

| NAIC Group Code | BUSINESS IN THE STATE OF | | | DURING THE YEAR | | | | | | | NAIC Company Code | |
|--|--------------------------|------------------------------------|-------|---------------------|-------------|-------------|---------------------------------------|----------------------|--------------------|-------|-------------------|--|
| | 1 | Arkansas | | 4 | 5 | 6 | 7 | 8 | 9 | 10 | | |
| | | Comprehensive (Hospital & Medical) | | | | | | | | | | |
| | | 2 | 3 | | | | | | | | | |
| | Total | Individual | Group | Medicare Supplement | Vision Only | Dental Only | Federal Employees Health Benefit Plan | Title XVIII Medicare | Title XIX Medicaid | Other | | |
| Total Members at end of: | | | | | | | | | | | | |
| 1. Prior Year | | | | | | | | | | | | |
| 2. First Quarter | | | | | | | | | | | | |
| 3. Second Quarter | | | | | | | | | | | | |
| 4. Third Quarter | | | | | | | | | | | | |
| 5. Current Year | | | | | | | | | | | | |
| 6. Current Year Member Months | | | | | | | | | | | | |
| Total Member Ambulatory Encounters for Year: | | | | | | | | | | | | |
| 7. Physician | | | | | | | | | | | | |
| 8. Non-Physician | | | | | | | | | | | | |
| 9. Total | | | | | | | | | | | | |
| 10. Hospital Patient Days Incurred | | | | | | | | | | | | |
| 11. Number of Inpatient Admissions | | | | | | | | | | | | |
| 12. Health Premiums Written (b) | | | | | | | | | | | | |
| 13. Life Premiums Direct | | | | | | | | | | | | |
| 14. Property/Casualty Premiums Written | | | | | | | | | | | | |
| 15. Health Premiums Earned..... | | | | | | | | | | | | |
| 16. Property/Casualty Premiums Earned | | | | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services..... | | | | | | | | | | | | |
| 18. Amount Incurred for Provision of Health Care Services | | | | | | | | | | | | |

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products .
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AMERIGROUP Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION AMERIGROUP Ohio, Inc. dba AMERIGROUP Community Care 2. Mason, OH

| NAIC Group Code | | BUSINESS IN THE STATE OF | | DURING THE YEAR | | | | | | | (LOCATION) | |
|--|--|--------------------------|------------------------------------|-----------------|---------------------|-------------|-------------|---------------------------------------|----------------------|--------------------|-------------------|--|
| 0671 | | Ohio | | 2019 | | | | | | | NAIC Company Code | |
| | | 1 | Comprehensive (Hospital & Medical) | | 4 | 5 | 6 | 7 | 8 | 9 | 10767 | |
| | | | 2 | 3 | | | | | | | | |
| | | Total | Individual | Group | Medicare Supplement | Vision Only | Dental Only | Federal Employees Health Benefit Plan | Title XVIII Medicare | Title XIX Medicaid | Other | |
| Total Members at end of: | | | | | | | | | | | | |
| 1. Prior Year | | 0 | | | | | | | | | | |
| 2. First Quarter | | 0 | | | | | | | | | | |
| 3. Second Quarter | | 0 | | | | | | | | | | |
| 4. Third Quarter | | 0 | | | | | | | | | | |
| 5. Current Year | | 0 | | | | | | | | | | |
| 6. Current Year Member Months | | 0 | | | | | | | | | | |
| Total Member Ambulatory Encounters for Year: | | | | | | | | | | | | |
| 7. Physician | | 0 | | | | | | | | | | |
| 8. Non-Physician | | 0 | | | | | | | | | | |
| 9. Total | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 10. Hospital Patient Days Incurred | | 0 | | | | | | | | | | |
| 11. Number of Inpatient Admissions | | 0 | | | | | | | | | | |
| 12. Health Premiums Written (b) | | 0 | | | | | | | | | | |
| 13. Life Premiums Direct | | 0 | | | | | | | | | | |
| 14. Property/Casualty Premiums Written | | 0 | | | | | | | | | | |
| 15. Health Premiums Earned | | 0 | | | | | | | | | | |
| 16. Property/Casualty Premiums Earned | | 0 | | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services..... | | 2,731 | | | | | | | | 2,731 | | |
| 18. Amount Incurred for Provision of Health Care Services | | 2,731 | | | | | | | | 2,731 | | |

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AMERIGROUP Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

AMERIGROUP Ohio, Inc. dba AMERIGROUP Community Care

2. Mason, OH

| NAIC Group Code | | BUSINESS IN THE STATE OF | | DURING THE YEAR | | | | | | | (LOCATION) | |
|--|---|------------------------------------|------------|-----------------|---------------------|-------------|-------------|---------------------------------------|----------------------|--------------------|-------------------|--|
| 0671 | | Grand Total | | 2019 | | | | | | | NAIC Company Code | |
| | | Comprehensive (Hospital & Medical) | | | | | | | | | 10767 | |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| | | Total | Individual | Group | Medicare Supplement | Vision Only | Dental Only | Federal Employees Health Benefit Plan | Title XVIII Medicare | Title XIX Medicaid | Other | |
| Total Members at end of: | | | | | | | | | | | | |
| 1. | Prior Year | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 2. | First Quarter | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 3. | Second Quarter | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 4. | Third Quarter | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 5. | Current Year | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 6. | Current Year Member Months | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Total Member Ambulatory Encounters for Year: | | | | | | | | | | | | |
| 7. | Physician | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 8. | Non-Physician | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 9. | Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 10. | Hospital Patient Days Incurred | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 11. | Number of Inpatient Admissions | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 12. | Health Premiums Written (b) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 13. | Life Premiums Direct | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 14. | Property/Casualty Premiums Written | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 15. | Health Premiums Earned | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 16. | Property/Casualty Premiums Earned | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 17. | Amount Paid for Provision of Health Care Services | 2,731 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2,731 | 0 | |
| 18. | Amount Incurred for Provision of Health Care Services | 2,731 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2,731 | 0 | |

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$0

30.GT

Schedule S - Part 1 - Section 2

N O N E

Schedule S - Part 2

N O N E

Schedule S - Part 3 - Section 2

N O N E

Schedule S - Part 4

N O N E

Schedule S - Part 4 - Bank Footnote

N O N E

Schedule S - Part 5

N O N E

Schedule S - Part 5 - Bank Footnote

N O N E

Schedule S - Part 6

N O N E

Schedule S - Part 7

N O N E

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

| States, Etc. | | Direct Business Only | | | | |
|--------------|--------------------------------|--------------------------------|-------------------------------------|--|---|--------|
| | | 1 | 2 | 3 | 4 | 6 |
| | | Life (Group and Individual) | Annuities (Group and Individual) | Disability Income (Group and Individual) | Long-Term Care (Group and Individual) | Totals |
| 1. | Alabama | AL | | | | |
| 2. | Alaska | AK | | | | |
| 3. | Arizona | AZ | | | | |
| 4. | Arkansas | AR | | | | |
| 5. | California | CA | | | | |
| 6. | Colorado | CO | | | | |
| 7. | Connecticut | CT | | | | |
| 8. | Delaware | DE | | | | |
| 9. | District of Columbia | DC | | | | |
| 10. | Florida | FL | | | | |
| 11. | Georgia | GA | | | | |
| 12. | Hawaii | HI | | | | |
| 13. | Idaho | ID | | | | |
| 14. | Illinois | IL | | | | |
| 15. | Indiana | IN | | | | |
| 16. | Iowa | IA | | | | |
| 17. | Kansas | KS | | | | |
| 18. | Kentucky | KY | | | | |
| 19. | Louisiana | LA | | | | |
| 20. | Maine | ME | | | | |
| 21. | Maryland | MD | | | | |
| 22. | Massachusetts | MA | | | | |
| 23. | Michigan | MI | | | | |
| 24. | Minnesota | MN | | | | |
| 25. | Mississippi | MS | | | | |
| 26. | Missouri | MO | | | | |
| 27. | Montana | MT | | | | |
| 28. | Nebraska | NE | | | | |
| 29. | Nevada | NV | | | | |
| 30. | New Hampshire | NH | | | | |
| 31. | New Jersey | NJ | | | | |
| 32. | New Mexico | NM | | | | |
| 33. | New York | NY | | | | |
| 34. | North Carolina | NC | | | | |
| 35. | North Dakota | ND | | | | |
| 36. | Ohio | OH | | | | |
| 37. | Oklahoma | OK | | | | |
| 38. | Oregon | OR | | | | |
| 39. | Pennsylvania | PA | | | | |
| 40. | Rhode Island | RI | | | | |
| 41. | South Carolina | SC | | | | |
| 42. | South Dakota | SD | | | | |
| 43. | Tennessee | TN | | | | |
| 44. | Texas | TX | | | | |
| 45. | Utah | UT | | | | |
| 46. | Vermont | VT | | | | |
| 47. | Virginia | VA | | | | |
| 48. | Washington | WA | | | | |
| 49. | West Virginia | WV | | | | |
| 50. | Wisconsin | WI | | | | |
| 51. | Wyoming | WY | | | | |
| 52. | American Samoa | AS | | | | |
| 53. | Guam | GU | | | | |
| 54. | Puerto Rico | PR | | | | |
| 55. | U.S. Virgin Islands | VI | | | | |
| 56. | Northern Mariana Islands | MP | | | | |
| 57. | Canada | CAN | | | | |
| 58. | Aggregate Other Alien | OT | | | | |
| 59. | Total | | | | | |

NONE

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|--------------|-------------------|------------|--------------|------------|--|---|-----------------------|-----------------------------------|--|--|---|--|-----------------------------------|-------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Y/N) | * |
| .0671 | Anthem, Inc. | | 36-3692630 | | 0001156039 | | American Imaging Management, Inc. | IL | NIA | Imaging Management Holdings, L.L.C. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 15544 | 46-4729682 | | 0001156039 | | America's 1st Choice of South Carolina, Inc. | SC | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 26-0308991 | | 0001156039 | | America's Health Management Services, Inc. | SC | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 12354 | 20-2073598 | | 0001156039 | | AMERIGROUP Community Care of New Mexico, Inc. | NM | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 54-1739323 | | 0001156039 | | AMERIGROUP Corporation | DE | UDP | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 82-1800037 | | 0001156039 | | AMERIGROUP Delaware, Inc. | DE | NIA | Anthem Partnership Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 16168 | 81-4131800 | | 0001156039 | | Amerigroup District of Columbia, Inc. | DC | IA | Anthem Partnership Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 16455 | 82-3743168 | | 0001156039 | | Amerigroup Health Plan of Louisiana, Inc. | LA | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 14078 | 45-2485907 | | 0001156039 | | Amerigroup Insurance Company | TX | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 15807 | 47-3863197 | | 0001156039 | | AMERIGROUP Iowa, Inc. | IA | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 45-4985009 | | 0001156039 | | Amerigroup IPA of New York, LLC | NY | NIA | CareMore, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 14276 | 45-3358287 | | 0001156039 | | Amerigroup Kansas, Inc. | KS | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95832 | 51-0387398 | | 0001156039 | | AMERIGROUP Maryland, Inc. | MD | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 16145 | 81-4626605 | | 0001156039 | | Amerigroup Mississippi, Inc. | MS | IA | Anthem Partnership Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95373 | 22-3375292 | | 0001156039 | | AMERIGROUP New Jersey, Inc. | NJ | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 10767 | 13-4212818 | | 0001156039 | | AMERIGROUP Ohio, Inc. | OH | RE | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 15994 | 81-2781685 | | 0001156039 | | AMERIGROUP Oklahoma, Inc. | OK | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 36-3897080 | | 0001156039 | | Amerigroup Partnership Plan, LLC | IL | NIA | Health Ventures Partner, L.L.C. | Ownership | 75.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 36-3897080 | | 0001156039 | | Amerigroup Partnership Plan, LLC | IL | NIA | UNICARE Illinois Services, Inc. | Ownership | 25.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 16339 | 82-3734368 | | 0001156039 | | Amerigroup Pennsylvania, Inc. | PA | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 12941 | 20-4776597 | | 0001156039 | | AMERIGROUP Tennessee, Inc. | TN | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95314 | 75-2603231 | | 0001156039 | | AMERIGROUP Texas, Inc. | TX | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 14073 | 27-3510384 | | 0001156039 | | AMERIGROUP Washington, Inc. | WA | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 12229 | 06-1696189 | | 0001156039 | | AMGP Georgia Managed Care Company, Inc. | GA | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 16553 | 83-2435050 | | 0001156039 | | AMH Health, LLC | ME | IA | Anthem Partnership Holding Company, LLC | Ownership | 50.000 | Anthem, Inc. | N | .0102 |
| .0671 | Anthem, Inc. | | | | 0001156039 | | Anthem Blue Cross Life and Health Insurance Company | CA | IA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 35-1898945 | | 0001156039 | | Anthem Financial, Inc. | DE | NIA | Associated Group, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95120 | 61-1237516 | | 0001156039 | | Anthem Health Plans of Kentucky, Inc. | KY | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 52618 | 31-1705652 | | 0001156039 | | Anthem Health Plans of Maine, Inc. | ME | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 53759 | 02-0510530 | | 0001156039 | | Anthem Health Plans of New Hampshire, Inc. | NH | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 71835 | 54-0357120 | 40003317 | 0001156039 | | Anthem Health Plans of Virginia, Inc. | VA | IA | Anthem Southeast, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 60217 | 06-1475928 | | 0001156039 | | Anthem Health Plans, Inc. | CT | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 61-1459939 | | 0001156039 | | Anthem Holding Corp. | IN | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 35-2145715 | | 0001156039 | New York Stock Exchange (NYSE) | Anthem, Inc. | IN | UIP | | | | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 98-1492098 | | 0001156039 | | Anthem Innovation Israel Ltd | ISR | NIA | Legato Holdings I, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 28207 | 35-0781558 | | 0001156039 | | Anthem Insurance Companies, Inc. | IN | IA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 15543 | 47-0992859 | | 0001156039 | | Anthem Kentucky Managed Care Plan, Inc. | KY | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 13573 | 20-5876774 | | 0001156039 | | Anthem Life & Disability Insurance Company | NY | IA | WellPoint Acquisition, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 61069 | 35-0980405 | | 0001156039 | | Anthem Life Insurance Company | IN | IA | Service, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 81-3974489 | | 0001156039 | | Anthem Partnership Holding Company, LLC | DE | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 46-0613946 | | 0001156039 | | Anthem Services Company, LLC | IN | NIA | The Anthem Companies, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 32-0031791 | | 0001156039 | | Anthem Southeast, Inc. | IN | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 35-2129194 | | 0001156039 | | Anthem UM Services, Inc. | IN | NIA | UNICARE Specialty Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 30-0606541 | | 0001156039 | | Anthem Workers' Compensation, LLC | IN | NIA | Company | Ownership | 75.000 | Anthem, Inc. | N | .0109 |
| .0671 | Anthem, Inc. | | 30-0606541 | | 0001156039 | | Anthem Workers' Compensation, LLC | IN | NIA | HealthLink, Inc. | Ownership | 25.000 | Anthem, Inc. | N | .0109 |
| .0671 | Anthem, Inc. | | 80-0531799 | | 0001156039 | | Applied Pathways, LLC | IL | NIA | American Imaging Management, Inc. | Ownership | 53.520 | Anthem, Inc. | N | .0108 |
| .0671 | Anthem, Inc. | | 80-0531799 | | 0001156039 | | Applied Pathways, LLC | IL | NIA | HEP AP Holdings, Inc. | Ownership | 46.480 | Anthem, Inc. | N | .0108 |
| .0671 | Anthem, Inc. | | 95-4640529 | | 0001156039 | | Arcus Enterprises, Inc. | DE | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | N | |

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|--------------|-------------------|------------|--------------|------------|--|---|-----------------------|-----------------------------------|---|--|---|--|-----------------------------------|-------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Per-centage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Y/N) | * |
| .0671 | Anthem, Inc. | | 90-1057454 | | 0001156039 | | Aspire Health, Inc. | DE | NIA | Nash Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 35-1292384 | | 0001156039 | | Associated Group, Inc. | IN | NIA | Anthem Insurance Companies, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 11-3713086 | | 0001156039 | | ATH Holding Company, LLC | IN | UIP | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 96962 | 58-1638390 | | 0001156039 | | Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. | GA | IA | Cerulean Companies, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 54003 | 39-0138065 | | 0001156039 | | Blue Cross Blue Shield of Wisconsin | WI | IA | Crossroads Acquisition Corp. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-3760980 | | 0001156039 | | Blue Cross of California | CA | IA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | .0101 |
| .0671 | Anthem, Inc. | | 20-2994048 | | 0001156039 | | Blue Cross of California Partnership Plan, Inc. | CA | IA | Blue Cross of California | Ownership | 100.000 | Anthem, Inc. | .N | .0101 |
| .0671 | Anthem, Inc. | | 84-1782311 | | 0001156039 | | CareMarket, Inc. | IN | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-4694706 | | 0001156039 | | CareMore Health Plan | CA | IA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | .N | .0101 |
| .0671 | Anthem, Inc. | 13562 | 38-3795280 | | 0001156039 | | CareMore Health Plan of Arizona, Inc. | AZ | IA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 13605 | 26-4001602 | | 0001156039 | | CareMore Health Plan of Nevada | NV | IA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 27-1625392 | | 0001156039 | | CareMore Health Plan of Texas, Inc. | TX | NIA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 32-0373216 | | 0001156039 | | CareMore, LLC | IN | NIA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-2076421 | | 0001156039 | | CareMore Health System | CA | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 58-2217138 | | 0001156039 | | Cerulean Companies, Inc. | GA | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 39-1413702 | | 0001156039 | | Claim Management Services, Inc. | WI | NIA | Blue Cross Blue Shield of Wisconsin | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 16345 | 82-1853423 | | 0001156039 | | CCHA, LLC | CO | IA | Anthem Partnership Holding Company, LLC | Ownership | 50.000 | Anthem, Inc. | .N | .0102 |
| .0671 | Anthem, Inc. | 14064 | 26-4674149 | | 0001156039 | | Community Care Health Plan of Louisiana, Inc. | LA | IA | Anthem Partnership Holding Company, LLC | Ownership | 75.000 | Anthem, Inc. | .N | .0104 |
| .0671 | Anthem, Inc. | 12586 | 20-3317697 | | 0001156039 | | Community Care Health Plan of Nevada, Inc. | NV | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 10345 | 31-1440175 | | 0001156039 | | Community Insurance Company | OH | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95693 | 39-1462554 | | 0001156039 | | Compcare Health Services Insurance Corporation | WI | IA | Blue Cross Blue Shield of Wisconsin | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-0334650 | | 0001156039 | | Crossroads Acquisition Corp. | DE | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 82-3027094 | | 0001156039 | | DBG Holdings, Inc. | IN | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 41-1905556 | | 0001156039 | | DeCare Analytics, LLC | MN | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 02-0574609 | | 0001156039 | | DeCare Dental Health International, LLC | MN | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | | | 0001156039 | | DeCare Dental Insurance Ireland, Ltd. | IRL | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 73-1665525 | | 0001156039 | | DeCare Dental Networks, LLC | MN | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 01-0822645 | | 0001156039 | | DeCare Dental, LLC | MN | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | | | 0001156039 | | DeCare Operations Ireland, Limited | IRL | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-0660775 | | 0001156039 | | Delivery Network, LLC | FL | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 26-2544715 | | 0001156039 | | Designated Agent Company, Inc. | KY | NIA | Anthem Health Plans of Kentucky, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 27-2844373 | | 0001156039 | | EasyScripts Outlier Bay, LLC | FL | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 26-2974996 | | 0001156039 | | EasyScripts Hialeah, LLC | FL | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 30-0478573 | | 0001156039 | | EasyScripts LLC | FL | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 46-0613819 | | 0001156039 | | EasyScripts Westchester, LLC | FL | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 13-3934328 | | 0001156039 | | EHC Benefits Agency, Inc. | NY | NIA | WellPoint Holding Corp | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 55093 | 23-7391136 | | 0001156039 | | Empire HealthChoice Assurance, Inc. | NY | IA | WellPoint Holding Corp | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95433 | 13-3874803 | | 0001156039 | | Empire HealthChoice HMO, Inc. | NY | IA | Empire HealthChoice Assurance, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 26-4286154 | | 0001156039 | | Federal Government Solutions, LLC | WI | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 10119 | 41-2128275 | | 0001156039 | | Freedom Health, Inc. | FL | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 33-0884790 | | 0001156039 | | GeniNet Physician Services, Inc. | CA | NIA | CareMore Health System | Ownership | 50.000 | Anthem, Inc. | .N | .0102 |
| .0671 | Anthem, Inc. | | 20-1378912 | | 0001156039 | | Global TPA, LLC | FL | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-2907752 | | 0001156039 | | Golden West Health Plan, Inc. | CA | IA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | .0101 |
| .0671 | Anthem, Inc. | 97217 | 58-1473042 | | 0001156039 | | Greater Georgia Life Insurance Company | GA | IA | Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 51-0365660 | | 0001156039 | | Health Core, Inc. | DE | NIA | Arcus Enterprises, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 54-1237939 | | 0001156039 | | Health Management Corporation | VA | NIA | Southeast Services, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 36-3897701 | | 0001156039 | | Health Ventures Partner, L.L.C. | IL | NIA | UNICARE National Services, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95169 | 54-1356687 | | 0001156039 | | HealthKeepers, Inc. | VA | IA | Anthem Southeast, Inc. | Ownership | 92.510 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95169 | 54-1356687 | | 0001156039 | | HealthKeepers, Inc. | VA | IA | UNICARE National Services, Inc. | Ownership | 7.490 | Anthem, Inc. | .N | |

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|--------------|-------------------|------------|--------------|------------|--|---|-----------------------|-----------------------------------|--|--|---|--|-----------------------------------|-------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Y/N) | * |
| .0671 | Anthem, Inc. | 96475 | 43-1616135 | | 0001156039 | | HealthLink HMO, Inc. | MO | IA | HealthLink, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 43-1364135 | | 0001156039 | | HealthLink, Inc. | IL | NIA | RightCHOICE Managed Care, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 82-4966088 | | 0001156039 | | HealthLink Insurance Company | IL | NIA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 13-3865627 | | 0001156039 | | HealthPlus HP, LLC | NY | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | .N | .0100 |
| .0671 | Anthem, Inc. | 10122 | 20-0982649 | | 0001156039 | | HealthSun Health Plans, Inc. | FL | IA | Highland Acquisition Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-0660271 | | 0001156039 | | HealthSun Holdings, LLC | FL | NIA | HealthSun Management, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-0660168 | | 0001156039 | | HealthSun Management, LLC | FL | NIA | Highland Acquisition Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 46-5250294 | | 0001156039 | | HealthSun Physicians Network, LLC | FL | NIA | Delivery Network, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 46-3434016 | | 0001156039 | | HealthSun Physicians Network I, LLC | FL | NIA | HealthSun Physicians Network, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 78972 | 86-0257201 | | 0001156039 | | Healthy Alliance Life Insurance Company | MO | IA | RightCHOICE Managed Care, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 47-3953545 | | 0001156039 | | HEP AP Holdings, Inc. | DE | NIA | Imaging Management Holdings, L.L.C. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-3867547 | | 0001156039 | | Highland Holdco, Inc. | DE | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-3487249 | | 0001156039 | | Highland Acquisition Holdings, LLC | DE | NIA | Highland Intermediate Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-3471305 | | 0001156039 | | Highland Intermediate Holdings, LLC | DE | NIA | Highland Investor Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-3493196 | | 0001156039 | | Highland Investor Holdings, LLC | DE | NIA | ATH Holding Company, LLC | Ownership | 72.480 | Anthem, Inc. | .N | .0107 |
| .0671 | Anthem, Inc. | | 81-3493196 | | 0001156039 | | Highland Investor Holdings, LLC | DE | NIA | Highland Holdco, Inc. | Ownership | 27.520 | Anthem, Inc. | .N | .0107 |
| | | | | | | | Rocky Mountain Hospital and Medical Service, Inc. | | | | | | | | |
| .0671 | Anthem, Inc. | 95473 | 84-1017384 | | 0001156039 | | HMO Colorado, Inc. | CO | IA | Service, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95358 | 37-1216698 | | 0001156039 | | HMO Missouri, Inc. | MO | IA | RightCHOICE Managed Care, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | | | 0001156039 | | Human Resource Associates, LLC | FL | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 75-2619605 | | 0001156039 | | Imaging Management Holdings, L.L.C. | DE | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 82-3062245 | | 0001156039 | | IngenioRX, Inc. | IN | NIA | DBG Holdings, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 98-1397080 | | 0001156039 | | Legato Health Technologies LLP | IN | NIA | Legato Holdings I, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | .0105 |
| | | | | | | | Legato Health Technologies Philippines, Inc. | | | | | | | | |
| .0671 | Anthem, Inc. | | 98-1490582 | | 0001156039 | | | PHL | NIA | Legato Holdings I, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | .0106 |
| .0671 | Anthem, Inc. | | 82-3030791 | | 0001156039 | | Legato Holdings I, Inc. | IN | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 82-3031178 | | 0001156039 | | Legato Holdings II, LLC | IN | NIA | Legato Holdings I, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 02-0581429 | | 0001156039 | | Living Complete Technologies, Inc. | MD | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| | | | | | | | Anthem Health Plans of New Hampshire, Inc. | | | | | | | | |
| .0671 | Anthem, Inc. | 95527 | 02-0494919 | | 0001156039 | | Matthew Thornton Health Plan, Inc. | NH | IA | | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 46-5262131 | | 0001156039 | | Memphis Supportive Care Partnership, LLC | TN | NIA | Nash Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| | | | | | | | Compcare Health Services Insurance Corporation | | | | | | | | |
| .0671 | Anthem, Inc. | | 39-2013971 | | 0001156039 | | Meridian Resource Company, LLC | WI | NIA | | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 82-4684953 | | 0001156039 | | Momentum Health Partners, LLC | NC | NIA | Anthem Partnership Holding Company, LLC | Ownership | 50.000 | Anthem, Inc. | .N | .0102 |
| .0671 | Anthem, Inc. | | 83-0892028 | | 0001156039 | | Nash Holding Company, LLC | DE | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 35-1840597 | | 0001156039 | | National Government Services, Inc. | IN | NIA | Federal Government Solutions, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 04-2919509 | | 0001156039 | | New England Research Institute, Inc. | MA | NIA | Health Core, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-5476630 | | 0001156039 | | NGS Federal, LLC | IN | NIA | Federal Government Solutions, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 12259 | 20-1336412 | | 0001156039 | | Optimum Healthcare, Inc. | FL | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-4249368 | | 0001156039 | | Park Square Holdings, Inc. | CA | NIA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-4386221 | | 0001156039 | | Park Square I, Inc. | CA | NIA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-4249345 | | 0001156039 | | Park Square II, Inc. | CA | NIA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 27-1991772 | | 0001156039 | | Pasteur Medical Birds Road, LLC | FL | NIA | Pasteur Medical Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-2749389 | | 0001156039 | | Pasteur Medical Center, LLC | DE | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 27-1366915 | | 0001156039 | | Pasteur Medical Cutler Bay, LLC | FL | NIA | Pasteur Medical Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-0610128 | | 0001156039 | | Pasteur Medical Group, LLC | FL | NIA | Pasteur Medical Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 37-1668303 | | 0001156039 | | Pasteur Medical Hialeah Gardens, LLC | FL | NIA | Pasteur Medical Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 45-1616220 | | 0001156039 | | Pasteur Medical Holdings, LLC | FL | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 47-3464152 | | 0001156039 | | Pasteur Medical Kendall, LLC | FL | NIA | Pasteur Medical Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 27-2810478 | | 0001156039 | | Pasteur Medical Management, LLC | FL | NIA | Pasteur Medical Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 33-1217936 | | 0001156039 | | Pasteur Medical Miami Gardens, LLC | FL | NIA | Pasteur Medical Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 27-2651017 | | 0001156039 | | Pasteur Medical North Miami Beach, LLC | FL | NIA | Pasteur Medical Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 26-0813665 | | 0001156039 | | Pasteur Medical Partners, LLC | FL | NIA | HealthSun Holdings, LLC | Ownership | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 56-2396739 | | 0001156039 | | Resolution Health, Inc. | DE | NIA | Anthem Southeast, Inc. | Ownership | 100.000 | Anthem, Inc. | .N | |

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AMERIGROUP Ohio, Inc.

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|--------------|-------------------|------------|--------------|------------|--|---|-----------------------|-----------------------------------|--|--|---|--|-----------------------------------|-------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Y/N) | * |
| .0671 | Anthem, Inc. | | 47-0851593 | | 0001156039 | | RightCHOICE Managed Care, Inc. Rocky Mountain Hospital and Medical Service, Inc. | DE | NIA | Anthem Holding Corp. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | .11011 | 84-0747736 | | 0001156039 | | | CO | IA | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-0473316 | | 0001156039 | | SellCore, Inc. | DE | NIA | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | .13726 | 27-0945036 | | 0001156039 | | Simply Healthcare Plans, Inc. | FL | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 55-0712302 | | 0001156039 | | Southeast Services, Inc. | VA | NIA | Anthem Southeast, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 45-4071004 | | 0001156039 | | State Sponsored Services, Inc. | IN | NIA | UNICARE Specialty Services, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 35-1835818 | | 0001156039 | | The Anthem Companies, Inc. | IN | NIA | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 45-5443372 | | 0001156039 | | The Anthem Companies of California, Inc. | CA | NIA | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 43-1967924 | | 0001156039 | | TrustSolutions, LLC | WI | NIA | Federal Government Solutions, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | .11810 | 84-1620480 | | 0001156039 | | UNICARE Health Plan of West Virginia, Inc. | WV | IA | UNICARE National Services, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 36-3899137 | | 0001156039 | | UNICARE Illinois Services, Inc. | IL | NIA | UNICARE National Services, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | .80314 | 52-0913817 | | 0001156039 | | UNICARE Life & Health Insurance Company | IN | IA | UNICARE National Services, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-4635507 | | 0001156039 | | UNICARE National Services, Inc. | DE | NIA | Anthem Holding Corp. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 77-0494551 | | 0001156039 | | UNICARE Specialty Services, Inc. | DE | NIA | Anthem Holding Corp. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 82-3300542 | | 0001156039 | | Valus, Inc. | IN | NIA | DBG Holdings, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-0660563 | | 0001156039 | | WellMax Health Medical Centers, LLC | FL | NIA | Delivery Network, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-0660644 | | 0001156039 | | WellMax Health Physicians Network, LLC | FL | NIA | Delivery Network, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-4405193 | | 0001156039 | | WellPoint Acquisition, LLC | IN | NIA | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-4640531 | | 0001156039 | | WellPoint California Services, Inc. | DE | NIA | Anthem Holding Corp. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-4657170 | | 0001156039 | | WellPoint Dental Services, Inc. | DE | NIA | UNICARE Specialty Services, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-2874917 | | 0001156039 | | WellPoint Health Solutions, Inc. | DE | NIA | Federal Government Solutions, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-3620996 | | 0001156039 | | WellPoint Holding Corp | DE | NIA | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| | | | | | | | WellPoint Information Technology Services, Inc. | | | | | | | | |
| .0671 | Anthem, Inc. | | 45-2736438 | | 0001156039 | | | CA | NIA | Blue Cross of California | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 36-4595641 | | 0001156039 | | WellPoint Insurance Services, Inc. | HI | NIA | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 47-2546820 | | 0001156039 | | WellPoint Military Care Corporation | IN | NIA | Federal Government Solutions, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | .15929 | 47-5569628 | | 0001156039 | | Wisconsin Collaborative Insurance Company | WI | IA | Crossroads Acquisition Corp. | Ownership..... | 55.000 | Anthem, Inc. | .N | .0110 |
| .0671 | Anthem, Inc. | | 20-8672847 | | 0001156039 | | WPMI, LLC | DE | NIA | ATH Holding Company, LLC | Ownership..... | 69.910 | Anthem, Inc. | .N | .0103 |

| Asterisk | Explanation |
|------------|---|
| 0100 | Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the New York State Department of Health. |
| 0101 | Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care. |
| 0102 | 50% owned by unaffiliated investors |
| 0103 | 30.09% owned by unaffiliated investors |
| 0104 | 25% owned by an unaffiliated investor |
| 0105 | Legato Health Technologies LLP is a Limited Liability Partnership formed under the laws of India, and is 99% owned by Legato Holdings I, Inc. an Indiana corporation, and 1% owned by Legato Holdings II, LLC, an Indiana Limited Liability company. |
| 0106 | Legato Health Technologies Philippines, Inc. was incorporated under with the Republic of the Philippines, and is 100% owned by Legato Holdings I, Inc. an Indiana corporation. |
| 0107 | Highland Investor Holding LLC is a Limited Liability Company formed under the laws of Delaware, and is 72.48% owned by Anthem Holding Company, LLC. an Indiana limited liability company, and 27.52% owned by Highland Holdco, Inc., a Delaware corporation. |
| 0108 | Applied Pathways, LLC is a Limited Liability Company formed under the laws of Illinois, and is 53.52% owned by American Imaging Management, Inc. an Illinois limited liability company, and 46.48% owned by HEP AP Holdings, Inc., a Delaware corporation. |
| 0109 | Anthem Worker's Compensation, LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc. |
| 0110 | 45% of WCIC is owned by Aurora Health Care, Inc. (non-affiliate) and 55% by Crossroads Acquisition Corp |

SCHEDULE Y
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|-------------------------|--------------|--|--------------------------|--------------------------|---|---|---|---|----|--|-----------------|---|
| NAIC Company Code | ID Number | Names of Insurers and Parent, Subsidiaries or Affiliates | Shareholder Dividends | Capital Contributions | Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments | Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s) | Management Agreements and Service Contracts | Income/ (Disbursements) Incurred Under Reinsurance Agreements | * | Any Other Material Activity Not in the Ordinary Course of the Insurer's Business | Totals | Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability) |
| | 36-3692630 | American Imaging Management, Inc. | | | | | (340,361,720) | | | | (340,361,720) | |
| 15544 | 46-4729682 | America's 1st Choice of South Carolina, Inc. | | | | | (303,992) | | | | (303,992) | |
| 12354 | 20-2073598 | AMERIGROUP Community Care of New Mexico, Inc. | | (54,976,214) | | | (2,336,204) | | | | (57,312,418) | |
| | 54-1739323 | AMERIGROUP Corporation | | | | | 58,616,140 | | | | 58,616,140 | |
| 16168 | 81-4131800 | AMERIGROUP District of Columbia, Inc. | | | | | (29,262,222) | | | | (29,262,222) | |
| 16455 | 82-3743168 | Amerigroup Health Plan of Louisiana, Inc. | | | | | | | | | | |
| | | | | | | | (815) | | | | (815) | |
| 14078 | 45-2485907 | AMERIGROUP Insurance Company | | | | | (74,490,686) | | | | (74,490,686) | |
| | 45-4985009 | Amerigroup IPA of New York, LLC | | | | | (20,029,433) | | | | (20,029,433) | |
| 15807 | 47-3863197 | AMERIGROUP Iowa, Inc. | | 55,000,000 | | | (121,902,155) | | | | (66,902,155) | |
| 14276 | 45-3358287 | AMERIGROUP Kansas, Inc. | | (150,000,000) | | | (2,892,704) | | | | (152,892,704) | |
| 95832 | 51-0387398 | AMERIGROUP Maryland, Inc. | (90,000,000) | | | | (119,448,085) | | | | (209,448,085) | |
| 16145 | 81-4626605 | AMERIGROUP Mississippi, Inc. | | | | | 1,622 | | | | 1,622 | |
| 95373 | 22-3375292 | AMERIGROUP New Jersey, Inc. | | | | | (114,962,141) | | | | (114,962,141) | |
| 10767 | 13-4212818 | AMERIGROUP Ohio, Inc. | (1,251,968) | (7,248,032) | | | (30,872) | | | | (8,530,872) | |
| 15994 | 81-2781685 | AMERIGROUP Oklahoma, Inc. | | | | | (10,784) | | | | (10,784) | |
| | 36-3897080 | Amerigroup Partnership Plan, LLC | | | | | (151,572,896) | | | | (151,572,896) | |
| 16339 | 82-3734368 | AMERIGROUP Pennsylvania, Inc. | | | | | 511 | | | | 511 | |
| 12941 | 20-4776597 | AMERIGROUP Tennessee, Inc. | | | | | (146,168,275) | | | | (146,168,275) | |
| 95314 | 75-2603231 | AMERIGROUP Texas, Inc. | | 25,000,000 | | | (573,506,837) | | | | (548,506,837) | |
| 14073 | 27-3510384 | AMERIGROUP Washington, Inc. | (15,100,000) | | | | (71,153,850) | | | | (86,253,850) | |
| 12229 | 06-1696189 | AMGP Georgia Managed Care Company, Inc. | (15,300,000) | | | | (163,354,941) | | | | (178,654,941) | |
| 16553 | 83-2435050 | AMH Health, LLC | | 6,500,000 | | | (177,344) | | | | 6,322,656 | |
| 62825 | 95-4331852 | Anthem Blue Cross Life and Health Insurance Company, Inc. | (180,100,000) | | | | (1,033,705,467) | 52,186,143 | | | (1,161,619,324) | 220,141,017 |
| 95120 | 61-1237516 | Anthem Health Plans of Kentucky, Inc. | (190,000,000) | | | | (393,954,739) | (9,361,065) | | | (593,315,804) | 25,847,747 |
| 52618 | 31-1705652 | Anthem Health Plans of Maine, Inc. | (58,600,000) | | | | (118,993,095) | | | | (177,593,095) | |
| 53759 | 02-0510530 | Anthem Health Plans of New Hampshire, Inc. | | | | | (88,170,097) | | | | (88,170,097) | |
| 71835 | 54-0357120 | Anthem Health Plans of Virginia, Inc. | (350,000,000) | | | | (556,933,088) | (27,798,003) | | | (934,731,091) | 109,950,079 |
| 60217 | 06-1475928 | Anthem Health Plans, Inc. | (79,700,000) | | | | (288,375,996) | | | | (368,075,996) | |
| 28207 | 35-0781558 | Anthem Insurance Companies, Inc. | (425,000,000) | | | | (1,352,367,602) | (2,639,172) | | | (1,780,006,774) | (102,424,008) |
| 15543 | 47-0992859 | Anthem Kentucky Managed Care Plan, Inc. | | | | | (59,615,003) | | | | (59,615,003) | |
| 13573 | 20-5876774 | Anthem Life and Disability Insurance Company | | | | | (3,001,752) | | | | (3,001,752) | |
| 61069 | 35-0980405 | Anthem Life Insurance Company | 0 | | | | (41,325,404) | 31,032,881 | | | (10,292,523) | (142,812,135) |
| | 81-3974489 | Anthem Partnership Holding Company, LLC | 0 | | | | (19,841,956) | | | | (19,841,956) | |
| | 46-0613946 | Anthem Services Company, LLC | | | | | 50,295,416 | | | | 50,295,416 | |
| | 35-2145715 | Anthem, Inc. | 3,595,051,968 | (19,275,754) | | | 6,006,236,160 | | | | 9,582,012,374 | |
| 15544 | 46-4729682 | APC Passe, LLC | | | | | | (181,235,982) | | | (181,235,982) | 189,070,842 |
| | 90-1057454 | Aspire Health, Inc. | 0 | | | | (70,607,205) | | | | (70,607,205) | |
| | 11-3713086 | ATH Holding Company, LLC | | | | | (46,293,396) | | | | (46,293,396) | |

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|-------------------------|--------------|---|--------------------------|--------------------------|---|---|---|---|----|--|-----------------|---|
| NAIC Company Code | ID Number | Names of Insurers and Parent, Subsidiaries or Affiliates | Shareholder Dividends | Capital Contributions | Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments | Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s) | Management Agreements and Service Contracts | Income/ (Disbursements) Incurred Under Reinsurance Agreements | * | Any Other Material Activity Not in the Ordinary Course of the Insurer's Business | Totals | Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability) |
| 96962 | 58-1638390 | Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. | (241,700,000) | | | | (875,259,237) | | | | (1,116,959,237) | |
| 54003 | 39-0138065 | Blue Cross Blue Shield of Wisconsin | (110,000,000) | | | | (128,448,232) | (7,269,339) | | | (245,717,571) | 33,349,826 |
| | 95-3760980 | Blue Cross of California | (450,000,000) | | | | (2,051,273,729) | | | | (2,501,273,729) | |
| | 20-2994048 | Blue Cross of California Partnership Plan, Inc. | (250,000,000) | | | | (324,300,331) | | | | (574,300,331) | |
| | 95-4694706 | Caremore Health Plan | (20,000,000) | | | | 842,178,067 | | | | 822,178,067 | |
| 13562 | 38-3975280 | Caremore Health Plan of Arizona, Inc. | | | | | 114,349,659 | | | | 114,349,659 | |
| 13605 | 26-4001602 | Caremore Health Plan of Nevada | | | | | 80,400,533 | | | | 80,400,533 | |
| 16345 | 82-1853423 | CCHA, LLC | | | | | (7,373) | (4,377,672) | | | (4,385,045) | 30,037,985 |
| 14064 | 26-4674149 | Community Care Health Plan of Louisiana, Inc. | | | | | (82,616,318) | | | | (82,616,318) | |
| 12586 | 20-3317697 | Community Care Health Plan of Nevada, Inc. | | | | | (78,522,461) | | | | (78,522,461) | |
| 10345 | 31-1440175 | Community Insurance Company | (386,600,000) | | | | (992,659,788) | (20,767,702) | | | (1,400,027,490) | 66,564,801 |
| 95693 | 39-1462554 | Compcare Health Services Insurance Corporation | (24,000,000) | | | | (144,626,584) | | | | (168,626,584) | |
| | 01-0822645 | DeCare Dental, LLC | | | | | (44,481,913) | | | | (44,481,913) | |
| 55093 | 23-7391136 | Empire HealthChoice Assurance, Inc. | (80,000,000) | (15,000,000) | | | (558,951,472) | | | | (653,951,472) | |
| 95433 | 13-3874803 | Empire HealthChoice HMO, Inc. | | 15,000,000 | | | (96,242,446) | | | | (81,242,446) | |
| 10119 | 41-2128275 | Freedom Health, Inc. | (6,600,000) | | | | (89,884,486) | | | | (96,484,486) | |
| | 95-2907752 | Golden West Health Plan, Inc. | | | | | (826,876) | | | | (826,876) | |
| 97217 | 58-1473042 | Greater Georgia Life Insurance Company | | | | | (9,903,337) | | | | (9,903,337) | |
| | 51-0365660 | Health Core, Inc. | | | | | (26,801,381) | | | | (26,801,381) | |
| | 54-1237939 | Health Management Corporation | | | | | (240,846,223) | | | | (240,846,223) | |
| 95169 | 54-1356687 | HealthKeepers, Inc. | (75,000,000) | | | | (518,708,076) | (8,968,740) | | | (602,676,816) | |
| 96475 | 43-1616135 | HealthLink HMO, Inc. | | | | | 4,171,276 | | | | 4,171,276 | |
| | 43-1364135 | HealthLink, Inc. | | | | | (45,731,260) | | | | (45,731,260) | |
| | 13-3865627 | HealthPlus LLC | | | | | (224,762,586) | | | | (224,762,586) | |
| 10122 | 20-0982649 | HealthSun Health Plans, Inc. | (44,000,000) | | | | (75,779,865) | | | | (119,779,865) | |
| | 20-0660168 | HealthSun Management, LLC | | | | | (50,680,602) | | | | (50,680,602) | |
| 78972 | 86-0257201 | Healthy Alliance Life Insurance Company | (200,200,000) | | | | (285,898,278) | | | | (486,098,278) | |
| 95473 | 84-1017384 | HMO Colorado, Inc. | (80,000,000) | | | | (198,196,328) | | | | (278,196,328) | |
| 95358 | 37-1216698 | HMO Missouri, Inc. | (18,000,000) | | | | (4,949,464) | | | | (22,949,464) | |
| | 82-3062245 | IngenioRx, Inc. | | | | | (195,947,061) | | | | (195,947,061) | |
| | 98-1397080 | Legato Health Technologies LLC | | | | | 99,420,232 | | | | 99,420,232 | |
| 95527 | 02-0494919 | Matthew Thornton Health Plan, Inc. | (50,000,000) | | | | (86,033,164) | | | | (136,033,164) | |
| | 39-2013971 | Meridian Resource Company, LLC | (16,000,000) | | | | (29,321,873) | | | | (45,321,873) | |
| 12259 | 20-1336412 | Optimum Healthcare, Inc. | (12,800,000) | | | | (59,401,638) | | | | (72,201,638) | |
| | 47-0851593 | RightCHOICE Managed Care, Inc. | | | | | (24,229,799) | | | | (24,229,799) | |
| 11011 | 84-0747736 | Rocky Mountain Hospital and Medical Service, Inc. | (70,000,000) | | | | (272,229,111) | (14,629,215) | | | (356,858,326) | 52,766,767 |
| 13726 | 27-0945036 | Simply Healthcare Plans, Inc. | (46,600,000) | | | | (321,465,982) | | | | (368,065,982) | |
| | 45-5443372 | The Anthem Companies of California, Inc. | | | | | 143,211,586 | | | | 143,211,586 | |

SCHEDULE Y
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|-------------------------|--------------|---|--------------------------|--------------------------|---|---|---|---|-----|--|---------------|---|
| NAIC Company Code | ID Number | Names of Insurers and Parent, Subsidiaries or Affiliates | Shareholder Dividends | Capital Contributions | Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments | Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s) | Management Agreements and Service Contracts | Income/ (Disbursements) Incurred Under Reinsurance Agreements | * | Any Other Material Activity Not in the Ordinary Course of the Insurer's Business | Totals | Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability) |
| | 35-1835818 | The Anthem Companies, Inc. | | | | | 6,463,929,276 | | | | 6,463,929,276 | |
| 11810 | 84-1620480 | UNICARE Health Plan of West Virginia, Inc. | (8,500,000) | | | | (50,613,422) | | | | (59,113,422) | |
| 80314 | 52-0913817 | UNICARE Life & Health Insurance Company | | 145,000,000 | | | (72,505,355) | 93,930,815 | | | 166,425,460 | (301,644,703) |
| | 45-2736438 | WellPoint Information Technology Services | | | | | 430,674,292 | | | | 430,674,292 | |
| | 36-4595641 | WellPoint Insurance Services, Inc. | | | | | (8,429,366) | 99,897,051 | | | 91,467,685 | (180,848,218) |
| 15929 | 47-5569628 | Wisconsin Collaborative Insurance Company | | | | | (17,798,597) | | | | (17,798,597) | |
| 9999999 Control Totals | | | 0 | 0 | 0 | 0 | 0 | 0 | XXX | 0 | 0 | 0 |

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AMERIGROUP Ohio, Inc.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES








The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

| | | Responses |
|--------------|--|-----------|
| MARCH FILING | | |
| 1. | Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? | YES |
| 2. | Will an actuarial opinion be filed by March 1? | WAIVED |
| 3. | Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?..... | YES |
| 4. | Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?..... | YES |
| APRIL FILING | | |
| 5. | Will Management's Discussion and Analysis be filed by April 1? | YES |
| 6. | Will the Supplemental Investment Risks Interrogatories be filed by April 1? | YES |
| 7. | Will the Accident and Health Policy Experience Exhibit be filed by April 1? | YES |
| JUNE FILING | | |
| 8. | Will an audited financial report be filed by June 1? | WAIVED |
| 9. | Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? | WAIVED |

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|---|---|
| AUGUST FILING | |
| 10. | Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? |
| WAIVED | |
| The following supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions. | |

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| MARCH FILING | |
| 11. | Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? |
| 12. | Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC? |
| 13. | Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?..... |
| 14. | Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?..... |
| 15. | Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?..... |
| 16. | Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?..... |
| 17. | Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? |
| 18. | Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? |
| 19. | Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?..... |
| APRIL FILING | |
| 20. | Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? |
| 21. | Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC? |
| 22. | Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? |
| 23. | Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? |
| 24. | Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? |
| 25. | Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? |
| AUGUST FILING | |
| 26. | Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? |
| NO | |

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| Bar Codes: | |
| 2. | Actuarial Opinion [Document Identifier 440] |
|  | |
| 8. | Audited Financial Report [Document Identifier 220] |
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| 9. | Accountants Letter of Qualifications [Document Identifier 221] |
|  | |
| 10. | Communication of Internal Control Related Matters Noted in Audit [Document Identifier 222] |
|  | |
| 11. | Medicare Supplement Insurance Experience Exhibit [Document Identifier 360] |
|  | |
| 12. | Life Supplement [Document Identifier 205] |
|  | |
| 13. | SIS Stockholder Information Supplement [Document Identifier 420] |
|  | |

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AMERIGROUP Ohio, Inc.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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| 14. | Participating Opinion for Exhibit 5 [Document Identifier 371] | <div><div></div><div>107672019371000000</div></div> |
| 15. | Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370] | <div><div></div><div>107672019370000000</div></div> |
| 16. | Medicare Part D Coverage Supplement [Document Identifier 365] | <div><div></div><div>107672019365000000</div></div> |
| 17. | Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224] | <div><div></div><div>107672019224000000</div></div> |
| 18. | Relief from the one-year cooling off period for independent CPA [Document Identifier 225] | <div><div></div><div>107672019225000000</div></div> |
| 19. | Relief from the Requirements for Audit Committees [Document Identifier 226] | <div><div></div><div>107672019226000000</div></div> |
| 20. | Long-Term Care Experience Reporting Forms [Document Identifier 306] | <div><div></div><div>107672019306000000</div></div> |
| 21. | Life Supplement [Document Identifier 211] | <div><div></div><div>107672019211000000</div></div> |
| 22. | Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216] | <div><div></div><div>107672019216000000</div></div> |
| 23. | Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217] | <div><div></div><div>107672019217000000</div></div> |
| 24. | Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 290] | <div><div></div><div>107672019290000000</div></div> |
| 25. | Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 300] | <div><div></div><div>107672019300000000</div></div> |
| 26. | Management's Report of Internal Control Over Financial Reporting [Document Identifier 223] | <div><div></div><div>107672019223000000</div></div> |

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